

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>EW</i>	<i>76520</i>	<i>02-28-00</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>3/9</i>
FORMALITY REVIEW	<i>CP</i>	<i>691205</i>	<i>4-27-00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	03/10/02
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Claim	Final	Original	Date
51	✓	✓	03/10/02
52	✓	✓	04/10/02
53	✓	✓	02/10/03
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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*HN*